Miami County YMCA Marlins Swim Team
2024 Long Course Registration Form

Swimmer Information- this program is for 11 and up swimmers only

Name _____
Last First Initial

Birthdate (MM/DD/YY) _____ Age as of 6/1/2024 _____ Male Female

Swimmer's e-mail address: _____

Parent Information

	Father's Contact Information	Mother's Contact Info - If different
Name		
Address		
City, State, Zip		
Home Phone		
Work Phone		
Cell/Pager No.		
E-mail		

Please include any addiitional information that the coaches should know about your child:

_____

_____

_____

_____

For Office Use ONLY:

Entered into Team Unify: _____